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transmitted to the USPTO (37) 273-2885, on the date indicated below. KNOBBE MARTENS OLSON & BEAR LLP 2040 MAIN STREET FOURTEENTH FLOOR IRVINE, CA 92614 m. APPLICATION NO. FILING DATE FIRST NAMED INVENTOR ATTORNEY DOCKET NO. CONFIRMATION NO. 10/635.423 08/06/2003 Valdemar Portney VGEN.019A 7328 FITLE OF INVENTION: ACCOMMODATING INTRAOCULAR LENS SYSTEM WITH ENHANCED RANGE OF MOTION APPLN. TYPE SMALL ENTITY ISSUE FEE DUE PUBLICATION FEE DUE PREV. PAID ISSUE FEE TOTAL FEE(S) DUE DATE DUE nonprovisional YES \$700 \$300 SO \$1000 06/08/2007 EXAMINER ARTUNIT CLASS-SUBCLASS WILLSE, DAVID H 3738 623-006340 Change of correspondence address or indication of "Fee Address" (37 CFR 1.363). 2. For printing on the patent front page, list Knobbe, Martens, Olson & (1) the names of up to 3 registered patent attorneys or agents OR, alternatively, Bear, LLP ☐ Change of correspondence address (or Change of Correspondence Address form PTO/SB/122) attached. (2) the name of a single firm (having as a member a registered attorney or agent) and the names of up to 2 registered patent attorneys or agents. If no name is listed, no name will be printed. Tee Address" indication (or "Fee Address" Indication form PTO/SB/47; Rev 03-02 or more recent) attached. Use of a Customer Number is required. ASSIGNEE NAME AND RESIDENCE DATA TO BE PRINTED ON THE PATENT (print or type) PLEASE NOTE: Unless an assignce is identified below, no assignce data will appear on the patent. If an assignce is identified below, the document has been filed for recordation as set forth in 37 CFR 3.11. Completion of this form is NOT a substitute for filing an assignment. (A) NAME OF ASSIGNEE (B) RESIDENCE: (CITY and STATE OR COUNTRY) VISIOGEN, INC. Jenner Street, Ste. 180, Irvine, CA 92618 Picase check the appropriate assignce category or categories (will not be printed on the pateot) : 🔲 Individual 🏵 Corporation or other private group entity 🔲 Government 4a. The following fee(s) are submitted: 4b. Payment of Fee(s): (Please first reapply any previously paid issue fee shown above) XX Issue Fee A check is enclosed. X⊠ Publication Fee (No small entity discount permitted) Payment by credit card. Form PTO-2038 is attached. Advance Order - # of Copies The Director is hereby authorized to charge the required fec(s), any deficiency, or credit any overpayment, to Deposit Account Number \_\_\_\_\_\_(enclose an extra copy of this form). 5. Change in Entity Status (from status indicated above) a. Applicant claims SMALL ENTITY status. See 37 CFR 1,27. □ b. Applicant is no longer claiming SMALL ENTITY status. See 37 CFR 1.27(g)(2). NOTE: The Issue Fee and Publication Fee (if required) will not be accepted from anyone other than the applicant; a registered attorney or agent; or the assignee or other party in interest as shown by the records of the United States Patent and Trademark Office. Authorized Signature سرمط Jennifer M. Pascua 56,489 - Typed or printed name Registration No.

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